

CLAIMS ONLY				Application Number <div style="font-size: 1.5em; font-weight: bold;">10627797</div>		Filing Date	
				Applicant(s)			
				* May be used for additional claims or amendments			

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Claims						

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
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Total Indep	2					
Total Depend	33					
Total Claims	35					

	Indep	Depend	Indep	Depend	Indep	Depend
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